

**FY 2011
PROGRAM PRIORITIES**

1. Assuring the delivery of quality family planning and related preventive health services, where evidence exists that those services should lead to improvement in the overall health of individuals, with priority for services to individuals from low-income families;
2. Expanding access to a broad range of acceptable and effective family planning methods and related preventive health services that include natural family planning methods, infertility services, and services for adolescents, including adolescent abstinence counseling. The broad range of services does not include abortion as a method of family planning;
3. Providing preventive health care services in accordance with nationally recognized standards of care. This includes, but is not limited to, breast and cervical cancer screening and prevention services; sexually transmitted disease (STD) and HIV prevention education, testing, and referral; and, other related preventive health services;
4. Emphasizing the importance of counseling family planning clients on establishing a reproductive life plan, and providing preconception counseling as a part of family planning services, as appropriate;
5. Addressing the comprehensive family planning and other health needs of individuals, families, and communities through outreach to hard-to-reach and/or vulnerable populations, and partnering with other community-based health and social service providers that provide needed services.
6. Identifying specific strategies for addressing the provisions of health care reform ("The Patient Protection and Affordable Care Act"), and for adapting delivery of family planning and reproductive health services to a changing health care environment, and assisting clients with navigating the changing health care system.

**FY 2011
KEY ISSUES**

1. Efficiency and effectiveness in program management and operations;
2. Cost of contraceptives, including long acting reversible contraceptives (LARC), other pharmaceuticals, and laboratory tests;
3. Management and decision-making through performance measures and accountability for outcomes;
4. Linkages and partnerships with HIV care and treatment providers, and mental health, drug and alcohol treatment providers;
5. HIV prevention integration in family planning settings, incorporating CDC's "Revised Recommendations for HIV Testing of Adults, Adolescents and Pregnant Women in Health Care Settings;"
6. The use of electronic technologies, such as electronic health record and practice management systems;
7. Data collection (such as the Family Planning Annual Report [FPAR]) for use in monitoring performance and improving family planning services;
8. Service delivery improvement through translation into practice of research outcomes that focus on family planning and related population issues;
9. Utilizing practice guidelines and recommendations, developed by recognized national professional organizations and Federal agencies, in the provision of evidence-based Title X clinical services; and,
10. Encouraging vaccination of individuals as the best protection against influenza.